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FILED

May 21 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F93000001235 (1)

1. Corporation Name  
SOUTHWIRE COMPANY

Principal Place of Business  
POST OFFICE BOX 1000  
CARROLLTON GA 30119

Mailing Address  
POST OFFICE BOX 1000  
CARROLLTON GA 30119



2. Principal Place of Business

21 Southwire Company

Suite, Apt. #, etc.

22 One Southwire Drive

City & State

23 Carrollton, Georgia

Zip

24 30119

Country

25 Carroll

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 30119

Country

30 Carroll

3. Date Incorporated or Qualified

03/03/1993

3a. Date of Last Report

04/12/1996

4. FEI Number

58-2020515

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE CDP ☐ DELETE  
NAME RICHARDS, ROY J  
STREET ADDRESS ONE SOUTHWIRE DR  
CITY-ST-ZIP CARROLLTON GA

TITLE D ☒ DELETE  
NAME RICHARDS, JAMES C  
STREET ADDRESS 303 PEACHTREE ST NE SUITE 4100  
CITY-ST-ZIP ATLANTA GA

TITLE D ☒ DELETE  
NAME COFER, DANIEL B  
STREET ADDRESS ONE SOUTHWIRE DR.  
CITY-ST-ZIP CARROLLTON GA 30119

TITLE D ☒ DELETE  
NAME GUDEFIN, MICHAEL J  
STREET ADDRESS 128 DINGLETOWN RD.  
CITY-ST-ZIP GREENWICH CT 06830

TITLE D ☐ DELETE  
NAME RICHARDS, ALICE H  
STREET ADDRESS ONE SOUTHWIRE DR.  
CITY-ST-ZIP CARROLLTON GA 30119

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D ☐ Change ☒ Addition  
1.2 NAME Holcombe T. Green, Jr.  
1.3 STREET ADDRESS 3343 Peachtree Rd., NE, Suite 1420  
1.4 CITY-ST-ZIP Atlanta, Georgia 30326

2.1 TITLE D ☒ Change ☐ Addition  
2.2 NAME Alfiero, Salvatore H.  
2.3 STREET ADDRESS One Towne Centre, 501 John James Audubon  
2.4 CITY-ST-ZIP Amherst, NY 14226-0810

3.1 TITLE V/D ☒ Change ☐ Addition  
3.2 NAME Wayne McAmis  
3.3 STREET ADDRESS One Southwire Drive  
3.4 CITY-ST-ZIP Carrollton, Georgia 30119

4.1 TITLE D ☒ Change ☐ Addition  
4.2 NAME Charles W. Denny  
4.3 STREET ADDRESS Square D Co., 1415 South Roselle  
4.4 CITY-ST-ZIP Palatine, Illinois 60067

5.1 TITLE D ☐ Change ☒ Addition  
5.2 NAME Eric Priestley  
5.3 STREET ADDRESS Jefferson Smurfit Corp., 8182 Maryland Ave.  
5.4 CITY-ST-ZIP St. Louis, Missouri 63105

6.1 TITLE D ☐ Change ☒ Addition  
6.2 NAME Nancy R. Farese  
6.3 STREET ADDRESS 25 Sixth Avenue  
6.4 CITY-ST-ZIP San Francisco, California 94118

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Anna L. Berry*  
Anna L. Berry, VP/Treasurer 5/07/97

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)